



Aging Planning Bulletin for Aging Leadership Planning Team Number 4

Geriatric/Adult Mental Health Specialty Teams (GAST)

Plans were developed in 2002 to increase community capacity to serve older adults and reduce reliance on State hospital services. The North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (MH/DD/SAS) funded 20 community-based geriatric mental health specialty teams (GAST) – seven of those teams serve multi-counties. Each team is composed of, at least, a nurse and a masters-level mental health clinician with geriatric expertise. Some teams that cover large areas have additional staff. In January 2007, another team member was added to address the needs of younger people with mental illness residing in long-term care facilities. The name of the team was changed to reflect this.

The purpose of the GAST is to increase the ability of older adults with mental illness to live successfully in their communities. The teams **do not provide direct services** to individuals but rather provide consultation, education, training, and technical assistance to the staff and caregivers of the individuals.

More specifically, the GAST provides service to the following:

- Nursing home, adult care home or family care home staff serving individuals who are 60 years of age or older with mental illness. These can be facilities identified during discharge planning for individuals who are in a state psychiatric hospital preparing to return to the community or facilities currently serving older adults with mental illness.
- Informal caregivers such as family and friends who are serving individuals in their home who are 60 years of age or older with mental illness and at risk for psychiatric hospitalization.
- Nursing home, adult care home, or family care home staff serving individuals between 18 and 60 years old with mental illness.

Relevance:

For Consumers:

Individuals residing in long-term care facilities benefit from GAST involvement because their caregivers are trained to better understand their mental health needs, leading to improved interactions. Staff learn how to respond to the individual to prevent psychiatric hospitalizations. GAST members have also provided training and consultation to the informal caregivers of people at imminent risk of psychiatric hospitalization with similar results.



For Service Providers:

With staff better trained to serve people with mental illness and become more confident in their interactions with the residents, some facilities that have received GAST services report less turn-over in staff.

Kathy Lewis, Administrator for Dunmore Plantation comments about the GAST services her agency has received: “Our staff is showing more confidence in their abilities towards working with our residents, which has also reduced staff stress. I believe that the increase in confidence and reduction in stress has reduced our turn-over rate, especially on the Alzheimer’s unit.”

Teresa Cating, RN, Director of Nursing for Summit Place Assisted Living adds: “The [Dementia] training sessions of the GAST has helped my staff better understand Alzheimer’s Disease and has enabled them to take even better care of our residents.”

Marry Pinnix of Pinebrook Residential Center: “Upon review of the previous three months of incident/accident reports, we found that a large percentage of the incidents were resolved in the facility by staff who had attended the in-service training classes. Newly learned techniques and preventative training appeared to have allowed our facility to avoid the “revolving door.”

Questions:

For Local Planning Team:

- How have the GAST services been utilized in your county? What is the reaction of facility operators?
- What has been done to inform consumers, services providers, and the community of the available services? Is something further needed?
- What is known about whether the GAST involvement has helped prevent psychiatric hospitalizations?
- What role has the GAST played in the lives of those with mental illness at risk for psychiatric hospitalization who reside in their own homes.

Contact and Resource Information:

Debbie Webster, Division of Mental Health, Developmental Disabilities, and Substance Abuse Services at debbie.webster@ncmail.net or 919-715-2774.

www.ncdhhs.gov/mhddsas/

Attached is a Statewide roster of the [GAST contacts](#)

A publication of the North Carolina Division of Aging and Adult Services in collaboration with the North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse Services